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Pat. 571410

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Trevor John BURKE ) PATENT  
Serial No.: 09/462,550 ) Atty. Docket No. P-5695  
National Phase of International )  
Patent Application PCT/GB98/01817 ) Examiner: Unassigned  
Filed: January 7, 2000 ) Group Art Unit: Unassigned  
For: PROGRAMME GENERATION )

SECOND PRELIMINARY AMENDMENT

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Dear Sir:

Prior to examination of this application, please amend the above-identified application as follows:

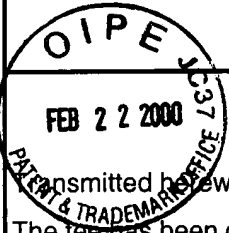
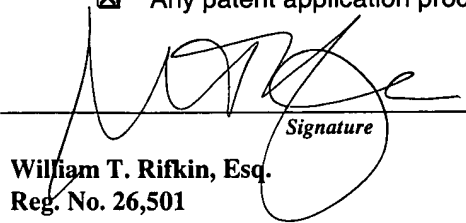

IN THE CLAIMS:

Please amend claims 4, 5, 8, 9, 11, 12, 14, 15, 16, 19 and 20 as follows:

4. (Amended) A method according to [any preceding] claim 1, wherein programme element selection is controlled automatically by applying predetermined selection criteria.

40 Rec'd PCT/PTO 22 FEB 2000

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. P-5695		
Applicant(s): Trevor John BURKE					
Serial No. 09/462,550	Filing Date January 7, 2000	Examiner Unknown	Group Art Unit Unknown		
Invention: PROGRAMME GENERATION					
<div style="display: flex; justify-content: space-between; align-items: center;"> <div style="text-align: left;">  </div> <div> <u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u> </div> </div>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	22 -	22 =	0 x	\$22.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$82.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 18-2284 A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p>					
 Signature <b>William T. Rifkin, Esq.</b> Reg. No. 26,501			Dated: 2/15/00		
<b>PIPER MARBURY RUDNICK &amp; WOLFE</b> P. O. Box 64807 Chicago, Illinois 60664-0807  (312) 368-4000			<div style="border: 1px solid black; padding: 5px;"> <p>I certify that this document and fee is being deposited on 2/15/00 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</p> <p style="text-align: center;">             Signature of Person Mailing Correspondence         </p> <p style="text-align: center;"> <b>Stephanie Warner-Wallace</b>            Typed or Printed Name of Person Mailing Correspondence         </p> </div>		
cc:					